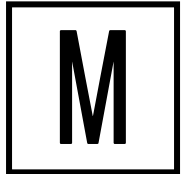




**CITY OF GRANTS PASS  
BUILDING DEPARTMENT  
(541) 450-6060 Fax (541) 476-9218  
101 NW "A" Street, Grants Pass OR 97526  
www.grantspassoregon.gov**

PERMIT NO. \_\_\_\_\_  
DATE \_\_\_\_\_  
ISSUED BY \_\_\_\_\_



# MECHANICAL PERMIT APPLICATION

(To be used as application for mechanical permit only, not in conjunction with a construction permit, or when a plan review is required.)

**PLEASE COMPLETE ALL SECTIONS, 1 THRU 4**

## 1. LOCATION OF INSTALLATION

Address \_\_\_\_\_

Job Description \_\_\_\_\_

PERMITS EXPIRE IF WORK IS NOT STARTED WITHIN 180 DAYS OF ISSUANCE OR IF WORK IS SUSPENDED FOR 180 DAYS.

## 2A. CONTRACTOR INSTALLATION ONLY:

Mechanical Contractor \_\_\_\_\_

Address \_\_\_\_\_

General Contractor \_\_\_\_\_

City Business Tax No. \_\_\_\_\_

Contractor's Board Reg. No. \_\_\_\_\_

License No. \_\_\_\_\_ Phone \_\_\_\_\_

## 2B. OWNER INFORMATION: (REQUIRED)

Owner Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

### For Owner installations please verify and sign below

The installation is being made on property I own which is not intended for sale, lease, or rent.

Owner's signature \_\_\_\_\_

**NOTE: It is the responsibility of the permittee to call for required inspections.**

## 3. COMPLETE FEE SCHEDULE BELOW

### A. Residential Mechanical Equipment Installation Base Permit Fee. **\$30.00**

Item	#Items	Cost (ea.)	Total
Heat Pump	_____	\$22.50	_____
Air Conditioner	_____	\$9.00	_____
Single Duct Exhaust	_____	\$6.75	_____
Range Hood	_____	\$6.75	_____
Gas Piping (Up to 4)	_____	\$3.00	_____
Freestanding Gas Stove/BBQ	_____	\$6.75	_____
Gas Fireplace Insert*	_____	\$6.75	_____
Woodstove Insert	_____	\$6.75	_____
Force Air Furnace	_____	\$9.00	_____
Floor Furnace	_____	\$9.00	_____
Recessed Wall Heater	_____	\$9.00	_____
Gas Appliance Vent (for each vented appliance)	_____	\$4.50	_____
Residential Water Heater for Radiator or Hydronic System	_____	\$22.50	_____
Stationary Evaporative Cooler	_____	\$6.75	_____
Vent System apart from Heat/AC	_____	\$6.75	_____
Gas Water Heater	_____	\$6.75	_____
Attic/Crawl Space Fans	_____	\$6.75	_____
Unclassified Appliance/Equipment	_____	\$6.75	_____
Repair of Mechanical System	_____	\$9.00	_____

\*If equipped with an electronic ignitor, an electrical permit may also be required.

### B. Commercial

Enter total valuation of mechanical system and installation costs: \$ \_\_\_\_\_

#### Fee bases on valuation of mechanical system:

\$1 to \$5,000	\$52.25
\$5,001 to \$10,000	\$52.25 + \$1.56 for each additional \$100 over \$5,000
\$10,001 to \$100,000	\$198.63 + \$10.69 for each additional \$1,000 over \$10,000
\$100,000 and up	\$1,166.87 + \$5.13 for each additional \$1,000 over \$100,000

Commercial fee from chart above \$ \_\_\_\_\_

## 4. TOTAL FEES DUE

A. Enter total of above fees \$ \_\_\_\_\_

B. Calculate Surcharge (A x .22) (12% STATE AND 10% PLANNING) \$ \_\_\_\_\_

C. TOTAL BALANCE DUE (A+B) \$ \_\_\_\_\_

**\*\*ADDITIONAL PLANNING REVIEW IS REQUIRED FOR ALL PERMITS WITHIN THE FLOODWAY/FLOODPLAIN\*\***